

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10 797510

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

| | | |
|----------------------------------|--------------|--------------------------|
| TOTAL CLAIMS | 60 | |
| FOR | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS | 60 minus 20= | *40 |
| INDEPENDENT CLAIMS | 13 minus 3 = | 10 |
| MULTIPLE DEPENDENT CLAIM PRESENT | | <input type="checkbox"/> |

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|---|-------|---|------------------|
| | Total | * | Minus | ** |
| Independent | * | Minus | *** | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | <input type="checkbox"/> | |

SMALL ENTITY
TYPE

| | |
|--------------|-------------|
| RATE | Fee |
| BASIC FEE | 385.00 |
| XS 9= | 360 |
| X43= | 430 |
| +145= | |
| TOTAL | 1175 |

OTHER THAN
OR SMALL ENTITY

| | |
|--------------|---------|
| RATE | Fee |
| BASIC FEE | 770.00 |
| XS18= | |
| X86= | |
| +290= | |
| TOTAL | |

OTHER THAN
OR SMALL ENTITY

SMALL ENTITY
OR

| | |
|----------------------------|------------------------|
| RATE | ADDI- TIONAL FEE |
| X\$ 9= | |
| X43= | |
| +145= | |
| TOTAL ADDT. FEE | |

| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|---|-------|---|------------------|
| | Total | * | Minus | ** |
| Independent | * | Minus | *** | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | <input type="checkbox"/> | |

RATE
ADDI-
TIONAL
FEE
OR

| | |
|----------------------------|------------------------|
| RATE | ADDI- TIONAL FEE |
| X\$ 9= | |
| X43= | |
| +145= | |
| TOTAL ADDT. FEE | |

| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|---|-------|---|------------------|
| | Total | * | Minus | ** |
| Independent | * | Minus | *** | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | <input type="checkbox"/> | |

RATE
ADDI-
TIONAL
FEE
OR

| | |
|----------------------------|------------------------|
| RATE | ADDI- TIONAL FEE |
| X\$ 9= | |
| X43= | |
| +145= | |
| TOTAL ADDT. FEE | |

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.